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**CITY AND COUNTY OF DENVER****DEPARTMENT OF ENVIRONMENTAL HEALTH**

Nancy J. Severson, Manager

JOHN W. HICKENLOOPER
MayorDivision of Environmental Quality
201 W Colfax Ave Dept 1009
Denver, CO 80202
PHONE: (720) 865-5452
FAX: (720) 865-5534
www.denvergov.org/DEH2005 AUG 22 PM 1:42
EPA REGION VIII
SUPERFUND BRANCH

August 17, 2005

Victor Ketellapper, P.E.
Project Manager
U.S. Environmental Protection Agency – Region VIII
Superfund Program
999 18th St., Suite 300
Denver, Colorado 80202-2466

Dear Mr. Ketellapper:

The July (2005) monthly status reports for the VB/I-70 Community Health Program are appended. As always, please feel free to contact me if you have any questions or would like to modify the content, format, or distribution of future reports.

Sincerely,

Martha F. Hoff, CIH, CSP
VB/I-70 Community Health Program Administrator

Enclosures (8)

VB/I-70 CHP July 2005 Update
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VB/I-70 CHP July 2005 Lead Data and Case Management Subcommittee Report
VB/I-70 CHP July 2005 Medical Management Subcommittee Report

cc:

Lorraine Granado – Cross Community Coalition
Beverly Lumumba, Ph.D. – Clayton Neighborhood Association
Michael Maes – Swansea Neighborhood
Gloria A. Shearer – Cole Neighborhood Association
Akwe Starnes – Whittier Neighborhood Association
Anthony Thomas – Civic Association of Clayton
Jim Weaver – Cole Neighborhood Association
Raquel Holquin – CEASE
Joan Hooker – Clayton Neighborhood Association

(via email only):

Sandy Douglas – Cole Neighborhood Association
Celia VanDerLoop – City and County of Denver, Department of Environmental Health
Bill Benerman – City and County of Denver, Department of Environmental Health
Gene Hook – City and County of Denver, Department of Environmental Health
Jason Salas – City and County of Denver, Department of Environmental Health
Beverly Tafoya-Dominguez – City and County of Denver, Department of Environmental Health
Jennifer Chergo – U.S. Environmental Protection Agency, Region VIII
Patricia Courtney – U.S. Environmental Protection Agency, Region VIII
Jane Mitchell – Colorado Department of Public Health and Environment
Mishelle Macias – Colorado Department of Public Health and Environment
Wendy Hawthorne – Northeast Denver Housing Center
Clementine Pigford – Northeast Denver Housing Center
Tonya Hope – c/o Northeast Denver Housing Center
Paul Melinkovich, M.D. – Denver Health and Hospital Authority
Mark Anderson, M.D. – Denver Health and Hospital Authority/PEHSU
Chris Poulet – Agency for Toxic Substances and Disease Registry
George Weber – George Weber Inc. Environmental

**Vasquez Boulevard/I-70 Community Health Education and Outreach Plan
Community Health Program Update – July 2005**

Program Area	July Tasks/Activities	August Tasks/Activities	Future Tasks/Activities
Health Education And Community Outreach	<p>Health Education</p> <p>Community Health Workers</p> <ul style="list-style-type: none"> ➤ Continued canvassing activities. ➤ Attended July CHP Group/clinic debriefing meetings, as well as community events and meetings. Attended weekly CHW Friday meetings. ➤ Assisted at biomonitoring clinics on 7/6, 7/19, and 7/23. <p>Program Development</p> <ul style="list-style-type: none"> ➤ Translated and released announcement/application packet for Small Grants. ➤ Finalized language for CHW independent contracts. ➤ Printed and distributed program business cards to CHW's. ➤ Produced final drafts for new outreach documents on Mexican candy and yard hot spots, and revised document on safe gardening. ➤ Continued development of new outreach document on costume jewelry with lead content. ➤ Release letters for KAPS test results; provided to CHW's for use during home visits. ➤ Began development of safe home renovation CHW positions. 	<p>Health Education</p> <p>Community Health Workers</p> <ul style="list-style-type: none"> ➤ Continue canvassing outreach. ➤ Attend community meetings/events, Working Group, CHP Group/clinic debriefing and weekly CHW Friday meetings. ➤ Assist in August biomonitoring outreach and clinic support. <p>Program Development</p> <ul style="list-style-type: none"> ➤ Continue City processing of 2005/2006 Cooperative Agreement once EPA grant is signed. ➤ Continue to solicit applications for small grants. ➤ Submit NDHC contract for signature. ➤ Finalize CHW contracts. ➤ Begin candidate interviews for CHW position openings. ➤ Complete document development and revisions for identified outreach materials. ➤ Begin process to hire DEH intern to assist with realtor, landlord, and contractor outreach, as well as other program facets. ➤ Evaluate small grants proposals as received. 	<p>Health Education</p> <p>Community Health Workers</p> <ul style="list-style-type: none"> ➤ Attend cultural diversity workshop. <p>Program Development</p> <ul style="list-style-type: none"> ➤ Schedule training for new CHW's. ➤ Review original training content and format to streamline training of new CHW's. ➤ Schedule cultural diversity workshop for CHW's. ➤ Define additional program outreach methods and audiences (e.g. school programs, community events, media campaigns, etc.). ➤ Partner with EPA in media campaign. ➤ Finalize preschool/daycare presentation; schedule presentations.

<u>Program Area</u>	<u>July Tasks/Activities</u>	<u>August Tasks/Activities</u>	<u>Future Tasks/Activities</u>
Health Education And Community Outreach	<p>Data Management/Evaluation</p> <ul style="list-style-type: none"> ➤ Determined in-house needs for IT support for development of field data database. <p>Community Partnership</p> <ul style="list-style-type: none"> ➤ Participated in CHP Group/Biomonitoring meetings (7/7, 7/14, 7/21) – notes available (Jennifer Chergo/EPA). Agreed to pilot CHW phone call/informal appointment strategy for 8/3 clinic and evaluate effectiveness. ➤ Participated in Outreach Development Group (ODG) meeting on 7/6 and related activities focusing on biomonitoring clinic outreach materials, banner, and newsletters – notes available. ➤ DEH and ODG received comments from CEASE pertaining CHW outreach materials review incorporated recommendation. ➤ Worked with Clayton (HCP), Cole, and Cross Community Coalition youth to distribute clinic flyers. 	<ul style="list-style-type: none"> ➤ Receive ideas and input from CEASE on realtor, landlord, and contractor outreach; begin outreach planning. <p>Data Management/Evaluation</p> <ul style="list-style-type: none"> ➤ Continue to track field contact metrics for evaluation of contact rates, home visits, and access agreements. ➤ Begin designing evaluation visit protocol and data form. ➤ Submit DEH IT request for database design and support; begin development. <p>Community Partnership</p> <ul style="list-style-type: none"> ➤ Further develop ideas to increase participation in clinics, potentially including games, prizes, and snacks. ➤ Review final drafts of new outreach material on costume/vending machine jewelry. Initiate draft of CHP fact sheet for inclusion in DHHA notification letters. ➤ Determine resource availability for folder/dividers presentation of outreach material after second quarter budget numbers are received. ➤ Continue to provide door flyers to community organizations so that youth can distribute prior to each clinic. ➤ Work with Cross Community Coalition to develop a newsletter article on program and biomonitoring clinics. 	<p>Data Management/Evaluation</p> <ul style="list-style-type: none"> ➤ Design report format for field contact metrics, event/meeting attendance, and CHW accountability. ➤ Establish procedure to conduct post-visit evaluation of outreach efforts through resident interviews. <p>Community Partnership</p> <ul style="list-style-type: none"> ➤ Define and develop second program year outreach messages, methods, audiences and materials. ➤ Provide cultural diversity workshop for attendance by all CHW's.

	<u>July Tasks/Activities</u>	<u>August Tasks/Activities</u>	<u>Future Tasks/Activities</u>
	<ul style="list-style-type: none"> ➤ Partnered to include program and clinic information in Civic Association of Clayton and Cole neighborhood newsletters. 	<ul style="list-style-type: none"> ➤ Continue to support community and EPA partnership efforts in obtaining remaining access agreements. 	
Biomonitoring	Biomonitoring Clinics <ul style="list-style-type: none"> ➤ Continued to distribute biomonitoring posters and table flyers with July – October clinic schedule, and to promote clinics at during all CHW activities. ➤ Followed biomonitoring outreach task matrix to complete biomonitoring activities. 	Biomonitoring Clinics <ul style="list-style-type: none"> ➤ Provide CHW's to support biomonitoring outreach and clinics. ➤ Assess the ability to provide games, prizes, and snacks at clinics in order to increase resident participation. 	Biomonitoring Clinics <ul style="list-style-type: none"> ➤ Conduct process improvement review of 2005 clinics to increase participation and efficiency for 2006 clinics.
Case Management	Case Management <ul style="list-style-type: none"> ➤ No residents with elevated lead or arsenic identified as of May 2005. 	Case Management	Case Management

**VB/I-70 Community Health Program
July 2005 Status Report
Steering Committee Report**

Steering Committee	
US EPA Region VIII	Victor Ketellapper
	Patricia Courtney
DEH	Celia VanDerLoop
	Gene Hook
	Jay Salas
	Martha Hoff - chair
ATSDR	Chris Poulet
DHHA	Paul Melinkovich, MD
PEHSU	Mark Anderson, MD
CDPHE	Mishelle Macias
	Jane Mitchell
Community	Gloria Shearer

Steering Committee Tasks
<ol style="list-style-type: none"> 1. Develop a Memorandum of Agreement (MOA) describing the roles of various agencies, responsibilities, reporting, information flow, and general funding responsibilities. <i>pending review – Denver City Attorney's Office</i> 2. Provide regular updates on program activities as required. <i>ongoing</i> 3. Review, approve, and coordinate planning, reporting, and activities of the program, Steering Committee, and its subcommittees. <i>ongoing</i> 4. Resolve disputes that arise through the course of the program and issues that are not resolved in subcommittees. <i>as necessary</i> 5. Identify, develop, and approve needed policies for effective program operation. <i>ongoing</i> 6. Coordinate between remedy implementation and community health program operations. <i>ongoing</i> 7. Provide necessary coordination and transfer of program data. <i>ongoing</i> 8. Provide oversight to the planning, implementation, and evaluation of the program. <i>ongoing</i> 9. Review program evaluation methods and results; modify program as necessary. <i>ongoing</i>

July Activities and Tasks
<ol style="list-style-type: none"> 1. A Steering Committee meeting was held 07/72/2005 – see attached meeting agenda and minutes. 2. DEH issued July 2005 status report for program, steering committee, and subcommittee activities. 3. MOA – pending review by City Attorney's Office; review expected to be complete by early August.
August Activities and Tasks
<ol style="list-style-type: none"> 1. Submit July status for program, steering committee, and subcommittee activities to EPA. 2. Develop initial report format for program measures (DEH); review with committee members.

2. Circulate MOA to all committee agencies to evaluate City Attorney's comments; begin signature process if language is acceptable to all parties.
3. Steward second year cooperative agreement through City process after EPA second year grant is signed in mid-August.

Future Activities and Tasks

1. Sign MOA.
2. Complete all necessary steps required by City to accept second program year funding (cooperative agreement).
3. Review first program year measures and evaluation.

VB/I-70 CHP
Steering Committee Meeting Agenda and Notes
Wednesday, July 27, 2005
Agenda

1. Monthly report format
2. Evaluation measures – basic report through 06/30/2005 by early August
3. Community Health Education and Outreach
 - ◊ Community Health Workers
 - ◊ Community Health Program Group
 - ◊ Outreach Development Group
4. Biomonitoring – subcommittee update
 - ◊ 2005 clinics
5. Lead Data and Case Management – subcommittee update Medical Management – subcommittee update
6. Arsenic Data and Case Management – subcommittee update
 - ◊ Results – notification letter
 - ◊ General case management process
7. Medical Provider Education – subcommittee update
8. Memorandum of Agreement – pending City attorney's review
9. NDHC contract

In Attendance

Victor Ketellapper (EPA), Jane Mitchell (CDPHE), Paul Melinkovich (DHHA), Gene Hook (DEH), Jason Salas (DEH), Martha Hoff (DEH), Wendy Hawthorne (NDHC)

Notes

There was brief discussion on the new subcommittee report template for the monthly EPA status report. Martha Hoff indicated that a year-to-date (through second quarter) measures report will be issued in mid August.

Jason Salas gave an overview of community health worker activities and progress. Martha updated the committee on the consolidation of the Community Health Group meeting with the weekly biomonitoring outreach clinic meeting. This will continue through early October when biomonitoring clinics cease until spring 2006.

There was discussion regarding the participation rate at clinics and factors that may be affecting it. Dr. Melinkovich indicated that DHHA has good success combining lead screenings with immunization clinics. He indicated that in the communities DHHA serves there seems to be a significant awareness regarding the need for immunizations.

Paul indicated that the Case Management protocol is complete, although to date, no elevated lead cases have been identified. Deb Kalisher has left DHHA; requests for lead data reports should be submitted to Amie Staudenmaier. Dr. Melinkovich said that VB/I-70 CHP information could be mailed with DHHA's lead notification letters.

Jane Mitchell provided an overview of the arsenic data notification and case management protocol. No elevated arsenic cases have been identified to date.

Martha stated that the City Attorney's Office should be finished with the MOA review shortly. Also, the NDHC contract insurance issues have been ironed out. Once contract language is modified to reflect necessary changes, the signature process will begin.

Victor Ketellapper indicated that on 9/30/2005, the URS contract will end and remaining activities will be transferred to the construction company.

**VB/I-70 Community Health Program
July 2005 Status Report
Subcommittee Report**

Arsenic Data and Case Management Subcommittee	
US EPA Region VIII	Wendy O'Brien or alternate
DEH	Gene Hook
CDPHE	Jane Mitchell - chair

Arsenic Data and Case Management Subcommittee Tasks
<ol style="list-style-type: none"> 1. Identify and select preferred reporting methods and format for arsenic data. [Complete] 2. Develop a quality assurance and quality control plan for arsenic data management. [Complete] 3. Develop a secure database system to assist with arsenic data management, reporting, and tracking. [In progress] 4. Develop acceptable case tracking protocols. [In progress] 5. Develop case coordination protocols. [Pending] 6. Identify appropriate trigger levels for case management and case coordination. [Complete] 7. Develop evaluation and reporting mechanisms, and schedule for arsenic data and case management issues. [In progress] 8. Report to the Steering Committee on progress, status, and issues requiring resolution. [On-going]

July Activities and Tasks
Distributed draft arsenic data management and case follow-up protocols to members of the Steering Committee.
August Activities and Tasks
Finalize draft arsenic data management and case follow-up protocols. Begin development of a case coordination protocol. Begin work on evaluation matrix. Finalize automated database reporting and case management formats.
Future Activities and Task
Work to finalize database reporting capabilities is ongoing. Work on evaluation matrix will be ongoing.

**VB/I-70 Community Health Program
July 2005 Status Report
Subcommittee Report**

Biomonitoring Subcommittee	
US EPA Region VIII	Wendy O'Brien or alternate
DEH	Gene Hook
DHHA	Marti Potter
	Linda Kauffman
CDPHE	Mishelle Macias – co chair, Lead
	Jane Mitchell – co chair, Arsenic
Community Technical Advisor	Michael Kosnett, MD (CEASE)
ATSDR	Chris Poulet
DHHA	Paul Melinkovich, MD
PEHSU	Mark Anderson, MD

Biomonitoring Subcommittee Tasks
<ol style="list-style-type: none"> 1. Identify and select preferred biological media and test methods for arsenic and lead biomonitoring. Complete 2. Recommend preferred methodologies for biological sample collection. Complete 3. Develop a quality assurance/quality control plan for biomonitoring program. 4. Identify and evaluate suitable laboratory protocols and assist with selection of acceptable analytical laboratories with a demonstrated ability to meet program data quality requirements. Complete 5. Develop required consent agreements to provide informed consent for community members considering participation in biomonitoring program. Complete 6. Coordinate with DHHA to address HIPPA concerns with blood lead biomonitoring activities and to provide required data confidentiality. Complete 7. Develop mechanisms to ensure the medical confidentiality of biomonitoring information. Complete 8. Ensure that appropriate state IRB reviews are conducted, if required, and coordinate with DHHA to determine need for COMIRB review. Complete 9. Interface with the community outreach and health education planning process as needed. Complete 10. Develop evaluation and reporting mechanisms, and schedule for biomonitoring issues, as requested by the steering committee. Ongoing 11. Report to the Steering Committee on progress, status, and issues requiring resolution. Ongoing

July Activities and Tasks
<p>(a) Five biomonitoring clinics were provided in the Clayton, Cole, Curtis Park, and Swansea neighborhoods in July. Six children were tested for arsenic (five urine arsenic tests and one hair arsenic test). Lead statistics listed below. Clinic hours were extended to 7:00 pm at the Swansea clinic to try to increase participation in that neighborhood.</p> <p>(b) The Biomonitoring Subcommittee currently meets on an as-needed basis only; no Biomonitoring Subcommittee meetings were convened in July.</p>

- (c) Attended the following clinic debriefing/planning meetings on: 7/7, 7/14, and 7/21. Discussed the number of children tested and what has and has not been working at the clinics.

July Statistics for lead: 7/6/05-11 children, 1 pregnant woman
7/19/05-15 children, 1 pregnant woman
7/19/05-24 children
7/20/05-4 children, 1 adult
7/23/05-12 children, 1 pregnant woman

July totals: 66 children, 3 pregnant women, 1 other adult

August Activities and Tasks

- (a) There are five clinics scheduled and four debriefing meetings scheduled.
- (b) Discussions will be held at CDPHE and at the next biomonitoring community group meeting to discuss whether the extended hours were successful in increasing participation, and whether staff can be made available on a routine basis to allow longer clinic hours.
- (c) Development of an evaluation matrix is ongoing.
- (d) Will attend the scheduled August debriefing meetings and update the committee that the Lead Poisoning Prevention Program is willing to extend clinic hours until six and do appointment based clinics on Saturdays with a minimum of ten people to test.

Future Activities and Tasks

Development of an evaluation matrix is ongoing.

**VB/I-70 Community Health Program
July 2005 Status Report
Subcommittee Report**

Health Education and Community Outreach Subcommittee	
US EPA Region VIII	Patricia Courtney – adjunct member
DEH	Jay Salas
	Beverly Tafoya-Dominguez – chair
DHHA	Marti Potter – adjunct member
ATSDR	Chris Poulet – adjunct member
Community	Gloria Shearer, Anthony Thomas

Health Education and Community Outreach Subcommittee Tasks
<ol style="list-style-type: none"> 1. Develop plans for outreach and program recruitment methods. <i>Complete, with ongoing evaluation.</i> 2. Work with communities to identify preferred testing locations, to develop preferred program advertisement methods, and to define recruitment strategies to help maximize program participation. <i>Complete, with ongoing evaluation and revision as needed.</i> 3. Develop materials for use during education and outreach activities. <i>Complete, with ongoing revisions and development as identified (see #6)</i> 4. Develop distribution plans for outreach and educational materials. <i>Ongoing</i> 5. Develop evaluation and reporting mechanisms for education and outreach activities and the identification of program revisions. <i>Ongoing, within CHP program development activities</i> 6. Develop a plan for on-going communication and feedback from the community regarding health education and outreach materials, as needed. <i>Complete, with ongoing evaluation.</i> 7. Report to the Steering Committee on progress, status, and issues requiring resolution. <i>Ongoing</i>

July Activities and Tasks
Provide bilingual newsletter articles for community newsletters with clinic schedule as a means of conducting outreach and recruitment. Design banner for bio-monitoring clinics, review clinic outreach posters, further refine recruitment strategies for clinic participation. Committee members provided information on community events at which educational materials and clinic schedules were passed out. Identified future events at which to conduct education and outreach. Committee members discussed information packet used during home visits with community members at a CEASE meeting. CEASE meetings were deemed an appropriate way to communicate and receive community feedback regarding health education and outreach materials. It was decided that suggested program revisions should be addressed to the larger CHP Group and/or Working Group.
August Activities and Tasks
Review newly developed and revised materials. Develop evaluation and reporting mechanisms. Continue document modification and development as requested or deemed necessary
Future Activities and Tasks

**VB/I-70 Community Health Program
July 2005 Status Report
Subcommittee Report**

Lead Data and Case Management Subcommittee	
US EPA Region VIII	Wendy O'Brien or alternate
DEH	Gene Hook, Martha Hoff
DHHA	Marti Potter
	Paul Melinkovich, MD - chair
CDPHE	Mishelle Macias

Lead Data and Case Management Subcommittee
<ol style="list-style-type: none"> 1. Identify and select preferred reporting methods and format for lead data. Complete with ongoing reports 2. Develop a quality assurance and quality control plan for lead data management. 3. Develop acceptable case tracking protocols. Complete 4. Develop case coordination protocols. Complete 5. Identify appropriate trigger levels for case management and case coordination. Complete 6. Develop evaluation and reporting mechanisms, and schedule for lead data and case management issues. Ongoing 7. Report to the Steering Committee on progress, status, and any issues needing resolution. Ongoing

July Activities and Tasks
<ul style="list-style-type: none"> • Completed reports for November through July outreach clinics • Informed parents of test results from community outreach clinics • Referred parents of children with elevated levels as per protocol • Development of map of lead testing of low-income children performed through a Denver Health clinic
August Activities and Tasks
<ul style="list-style-type: none"> • Continue to monitor clinic testing data • Inform patients of results per protocol and provide case management as needed • Further develop mapping of lead testing to include tests performed by other (non-DH) providers in Denver • Develop clinic specific reports to assess specific clinic effectiveness with lead testing
Future Activities and Tasks
<ul style="list-style-type: none"> • Develop mapping reports to assess changes over time of testing penetration in Denver and potential impact of the VB/I-70 program on that testing

**VB/I-70 Community Health Program
July 2005 Status Report
Subcommittee Report**

Medical Management Subcommittee	
ATSDR	Chris Poulet
DHHA	Paul Melinkovich, MD - chair
PEHSU	Mark Anderson, MD

Medical Management Subcommittee Tasks
<ol style="list-style-type: none">1. Develop protocols for further evaluation and treatment of children identified with elevated levels of lead and/or arsenic. Complete2. Develop evaluation and reporting mechanisms for medical management issues.3. Report to the Steering Committee on progress, status, and issues requiring resolution.

July Activities and Tasks
<ul style="list-style-type: none">• Protocol reviewed and reaffirmed• No medical management performed as no elevated tests
August Activities and Tasks
Future Activities and Tasks